



City and County of San Francisco
Department of Public Health
BEHAVIORAL HEALTH SERVICE
SUBSTANCE USE DISORDER SERVICES

June 1, 2018

AVAILABILITY OF SUBSTANCE ABUSE TREATMENT IN SAN FRANCISCO

The Department of Public Health, Behavioral Health Service, funds, supports and oversees a broad network of approximately 45 community-based substance abuse treatment programs. The funded capacity for FY 2017-2018 listed below indicates changes in funding and slots since 2015-16.

Modality	FY15-16 Beds	FY16-17 Beds	FY17-18 Beds	FY15-16 Funding	FY16-17 Funding	FY17-18 Funding
Residential	373	377	370	\$ 13,981,814	\$ 15,781,835	\$ 16,176,381
Residential Detox	62	51	60	\$ 4,869,908	\$ 4,592,344	\$ 4,707,153

Modality	FY15-16 UDC	FY16-17 UDC	FY17-18 UDC	FY15-16 Funding	FY16-17 Funding	FY17-18 Funding
Outpatient, Day Trea	9,510	8,970	8,103	\$ 9,000,591	\$ 8,329,172	\$ 8,537,402
Narcotic Replacement	4,047	4,091	4,259	\$ 16,083,248	\$ 18,211,248	\$ 18,666,529

Currently the access to substance abuse treatment in San Francisco is better than at any time in the past. There is no wait for:

- Narcotic Replacement Treatment,
- Outpatient Treatment,
- Residential Detox,
- Perinatal Residential Treatment.

For single adults Residential Treatment has an average wait of approximately two weeks. During the waiting time, all clients are offered counseling, outpatient treatment, and medication assisted treatment. San Francisco's treatment system is large enough that there is at least some turn over every day. The department exercises immediate priority placement for acute and sensitive cases. The continuous easy entry into Narcotic Replacement Treatment and newer Medication Assisted Treatment programs has had a moderating effect on the demand for residential treatment.

As of May 1, 2018, The Department began to bill Drug Medi-Cal (federal Medicaid) for residential treatment for the first time ever. The Department anticipates that additional Drug Medi-Cal revenue should reduce the need for waiting lists over the next several years.

The following medications have been added to Narcotic Treatment Programs and several other outpatient clinics: Buprenorphine as an alternative to methadone; Disulfiram as an adjunct to methadone or buprenorphine to reduce alcohol consumption; Naloxone is distributed to clients for use at later times as needed to enable individuals to reverse the potentially fatal effects of narcotic overdose.

